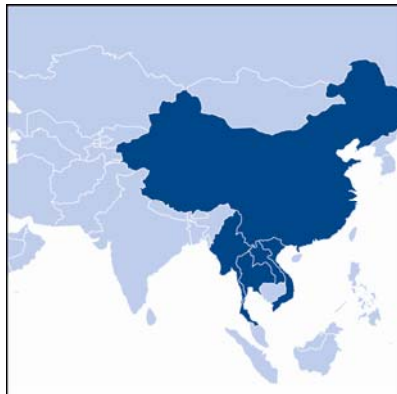




TUBERCULOSIS PROFILE



Country	CDR	TSR
Burma	109	85
China	79	94
Laos	77	90
Thailand	73	75
Vietnam	85	92

WHO Global TB Report 2008
CDR = Case detection rate
TSR = Treatment success rate

The USAID Regional Development Mission for Asia (RDMA) manages regional programs that benefit all of East Asia and much of South Asia and the Pacific. RDMA supports tuberculosis (TB) activities in nine high-burden countries (HBC) (Bangladesh, Burma, Cambodia, China, India, Indonesia, Philippines, Thailand, and Vietnam) but focuses particularly on five countries in the Greater Mekong subregion: Burma, China, Laos, Thailand, and Vietnam.

Together, the five focus countries accounted for almost 18 percent of global TB cases in 2006, with 14.3 percent in China alone. There were more than 703,000 estimated new sputum smear positive TB cases in 2006 and an estimated 241,000 deaths in these countries, despite tremendous progress in the implementation of the DOTS (directly observed treatment, short course) strategy. All five countries have achieved global targets for case detection (70 percent) and treatment success (85 percent), except for Thailand (see chart at left).

The presence of multidrug-resistant (MDR) TB in the focus countries ranges from 1.7 percent in Laos to 5.0 percent in China. In 2006, these five countries accounted for 15.3 percent of the new MDR-TB cases globally, 88 percent of which occurred in China. Extensively drug-resistant (XDR) TB has been confirmed in China (Hong Kong), Vietnam, and Thailand. Treatment of MDR-TB is limited throughout the region. For example, in China, only 0.3 percent of MDR-TB patients were projected to be treated in 2008.¹ Challenges to TB control include a lack of quality assured laboratories for culture and drug susceptibility testing (DST), which are essential for diagnosis and treatment of MDR-TB. The lack of laboratory capabilities also hinders efforts to conduct surveillance for drug resistance in the region. Expanding laboratory capacity for DST for both first and second-line drugs in the region and training more staff are urgent priorities in most countries.

USAID Approach and Key Activities

USAID/Asia's TB goal is to contribute significantly to the regional reduction of morbidity and mortality associated with TB. The approach to achieve this goal lies in six key strategic areas: expanding and enhancing DOTS (directly observed treatment, short course), increasing access to high-quality and affordable medications, improving management of MDR-TB and XDR-TB, addressing the TB-HIV/AIDS "syndemic," developing new tools and approaches, and strengthening information systems and data use. USAID works in partnership with the World Health Organization (WHO), U.S. CDC, Management Sciences for Health, United States Pharmacopeia (USP), and Population Services International to implement strategic priority interventions in the following ways:

- Supporting laboratory quality assurance in HBC
- Expanding culture and DST services in areas with high MDR-TB and TB-HIV co-infection
- Involving private health providers in DOTS scale up
- Increasing availability of high-quality drugs for the treatment of TB
- Providing technical assistance to strengthen pharmaceutical management of TB drugs to reduce stockouts (absence of drugs) at facilities and expanding drug management training
- Strengthening collaboration between TB and HIV national programs

¹ WHO Global TB Report 2008.

- Supporting operational research studies to develop new tools and approaches
- Supporting the establishment of a Model Center focused on MDR-TB and XDR-TB for the training of national and nongovernmental TB staff from the Asia region
- Providing technical assistance for development and implementation of MDR-TB program strategies, including expanding public-private partnerships for TB control and implementing funds from the Global Fund to Fight AIDS, Tuberculosis and Malaria
- Supporting supranational reference laboratories in Thailand and India to provide external quality assurance activities and technical assistance for TB laboratories throughout Asia
- Collecting population-based TB data to strengthen national programs' capacities to analyze the data and use them for priority setting, decisionmaking, and planning purposes

USAID Program Achievements

USAID support has contributed to the following achievements:

- Sustained case detection rate at 78 percent and treatment success at 91 percent, both above the WHO targets in the WHO Western Pacific Region, making it the first and only WHO Region to have achieved the global TB control targets
- Engaged a wide range of health providers in TB control and strengthened capacities of countries to develop locally-based advocacy, communications, and social mobilization strategies
- Established the Thailand TB Active Surveillance Network, which has strengthened capacity for mycobacterial culture, identification, and DST throughout the region
- Developed a new algorithm, which will be incorporated into regional and global WHO guidelines, using a combination of symptoms to identify about 90 percent of HIV-infected patients with TB
- Strengthened collaboration between national TB and HIV/AIDS programs by finalizing regional-specific TB and HIV training modules, conducting situational analysis of ongoing TB-HIV activities in five countries, and providing technical support for TB-HIV program implementation to four countries.
- Assisted with revising the regional TB-HIV Framework, which will guide countries on accelerating implementation of TB-HIV collaborative activities
- Assisted the National TB Control Programs of Cambodia, Mongolia, and Vietnam in reviewing public-private mix (PPM) DOTS pilot projects and expanded the PPM-DOTS approach based on lessons learned from the Philippines
- Introduced and disseminated the *International Standards for Tuberculosis Care*
- Provided technical assistance with the establishment of Green Light Committee-approved MDR-TB management in Vietnam, Mongolia, the Philippines, and Cambodia and supported Samoa and Federated States of Micronesia for fast-track application approval
- Promoted rational medicine use by training 198 participants in the Drug and Therapeutics Committee (DTC) training course to improve the selection and use of medicines and instructed 40 participants in the "Monitoring, Training, and Planning" methodology that assists in the implementation of DTC-related activities
- Provided laboratory infrastructure and training and strengthened capacity for TB diagnosis and DST in Thailand, which enabled the performing of TB cultures on 3,226 patients and the diagnosing of 83 patients with MDR-TB
- Tested 85 percent of registered TB patients in U.S. Government-supported programs for HIV, surpassing the target of 80 percent
- Provided assistance to four national TB prevalence surveys in the Philippines, Cambodia, Vietnam, and Laos; two operational research studies; and one surveillance activity in Thailand
- Supported the Technical Advisory Group meeting of WHO's Western Pacific Regional Office, which addressed issues of MDR-TB, XDR-TB, TB-HIV, and the strengthening of regional laboratory capacity

Partnerships

Host-country governments collaborate with USAID and provide resources for DOTS implementation to various degrees. WHO and the U.S. CDC are the two primary partners in USAID assistance. Through the USP, USAID is developing the Asian Network of Excellence in Quality Assurance of Medicines, which provides a permanent regional source of technical assistance for all stakeholders supplying essential medicines. The supranational reference laboratories in Thailand and India provide laboratory support and coordination in the region. In China, USAID is also supporting WHO to provide technical assistance to a World Bank TB project and a Bill and Melinda Gates Foundation TB project. In Rounds 1 through 7, the Global Fund has approved TB budgets of \$416.5 million to countries in the region and disbursed approximately \$235.2 million.